

BOOKING FORM

Company Name:	
Contact Person:	
Telephone Number:	
Mobile Number:	
Email Address:	
Number of Staff Required:	
Type of Staff: (e.g. Male/Female)	
Geographical Area:	
Dates Required:	
Number of Days:	
Number of Weeks:	
Standard Uniform required: YES/NO (White Shirt & Black Jumper/ Jacket Trousers and Shoes)	

Terms and Conditions

Payment Terms:

30 Day Credit Notice (4% charged if payment not received 7days after the due date)

Minimum Period of Notice: 12hrs

Authorised Signatory

Date of Signature

FAXBACK: 020 8711 6204

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